

Joint Readiness Clinical Advisory Board



DoD Requirement Mission & History

- 1945 - Army-Navy Specification Cataloging Committee
- 1949 - Armed Forces Medical Materiel and Specifications Committee
- 1957 - Armed Services Medical Materiel Coordinating Committee
- 1962 - Defense Medical Materiel Board (DMMB) - *DoDD 5154.18 published*
- 1975 - Move to Ft. Detrick & change of Executive Agent from Navy to Army
- 1984 - Defense Medical Standardization Board (DMSB) - *DoDD 6430.2 published*
- 1998 - Joint Readiness Clinical Advisory Board

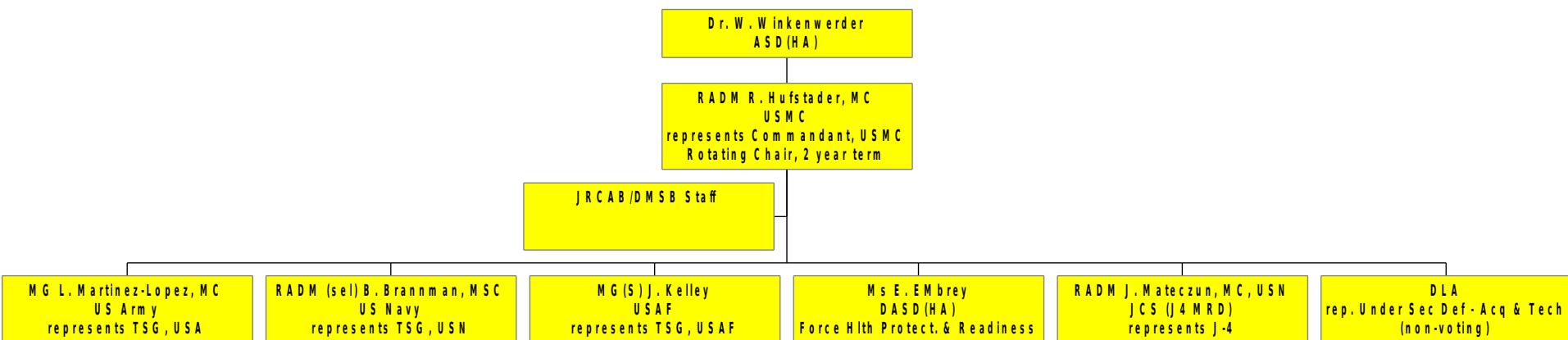
AR 10-64
Sep 88

DoDD 6000.12
Apr 96

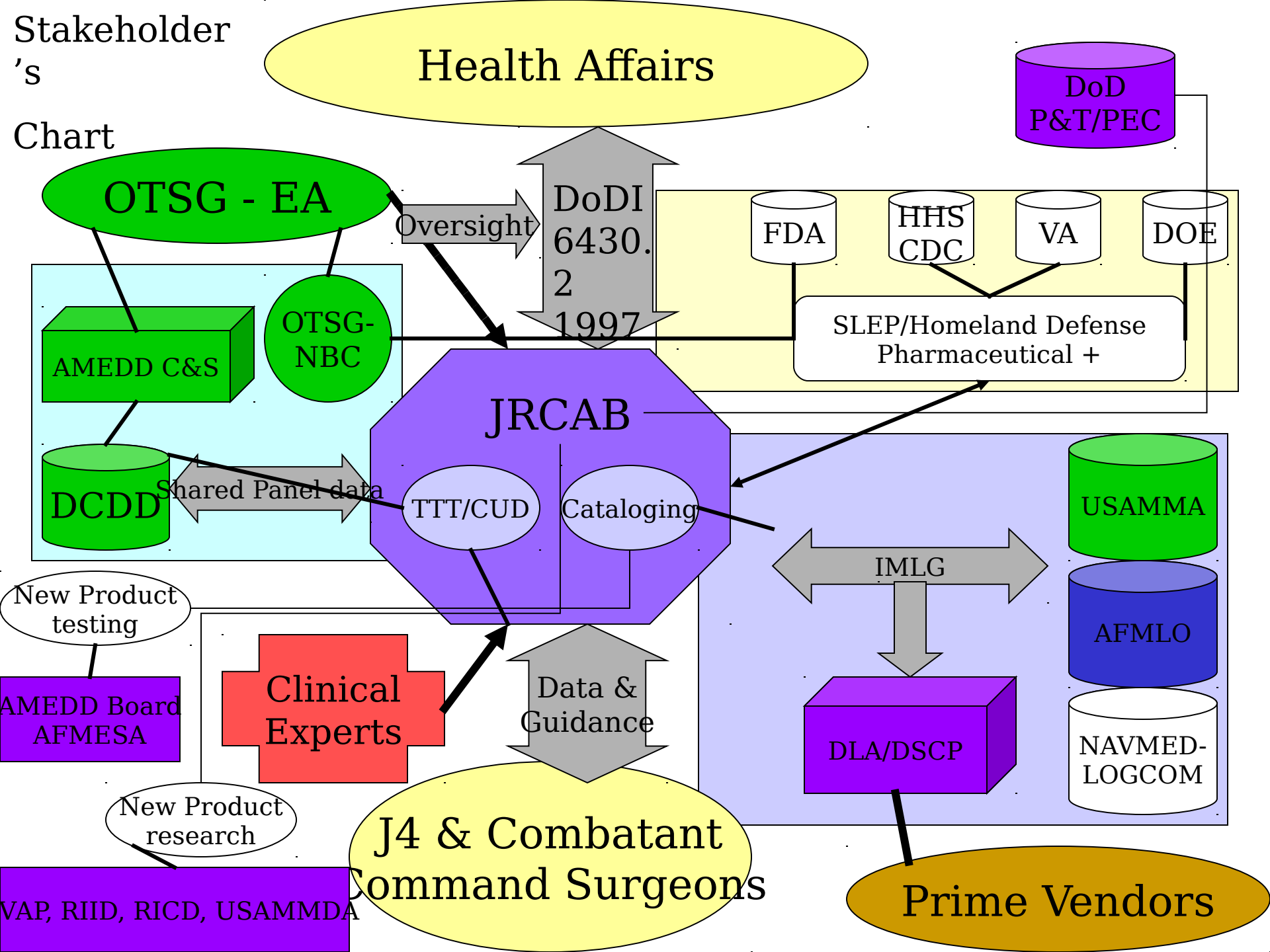
DoDI 6430.2
Mar 97

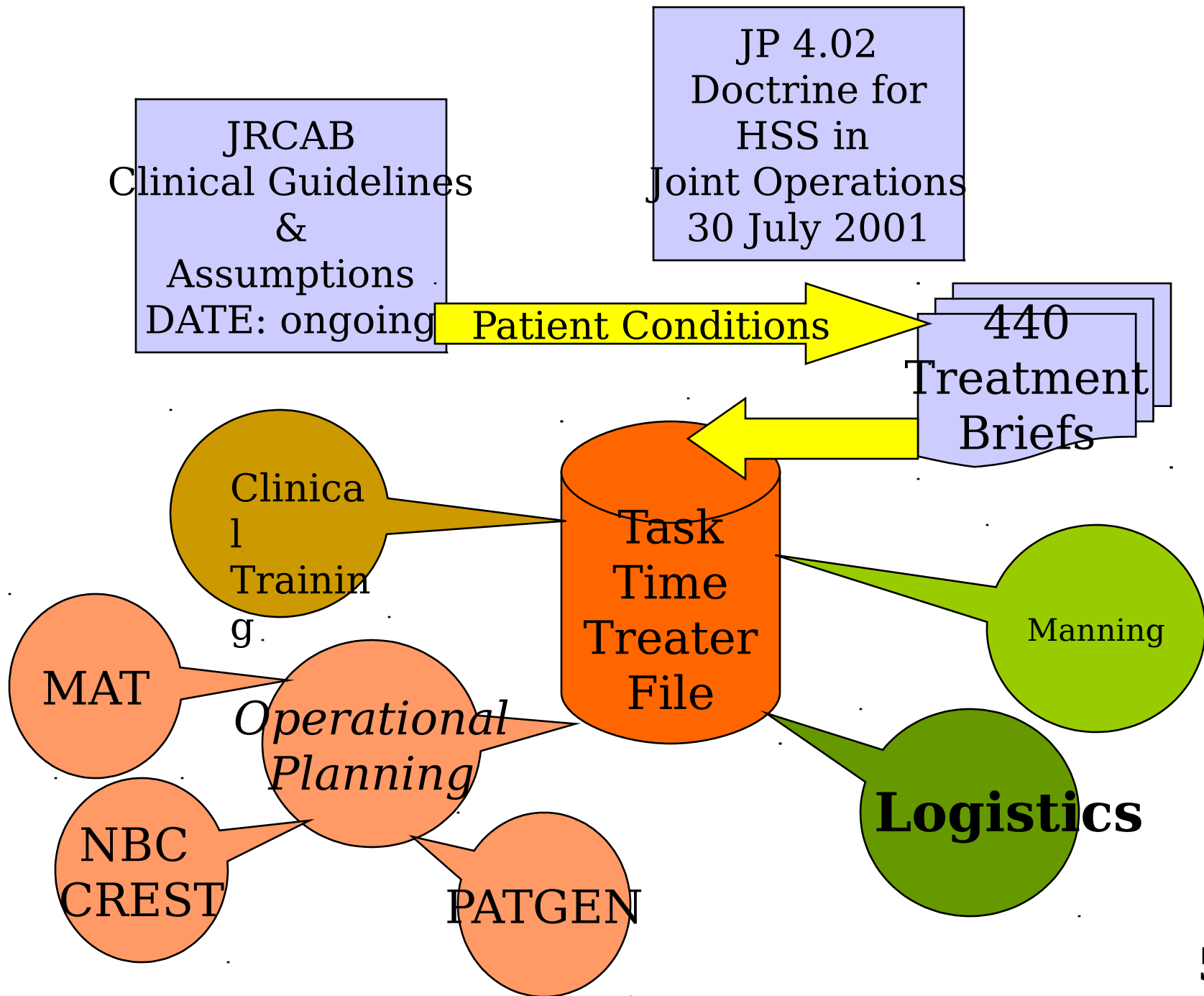
The DMSB, a joint DoD activity, shall
Provide policy and standardization of
relative to the development of deployed
medical systems and medical materiel
for the delivery of healthcare in the
Health Services System...*DoDD 6000.12*

JRCAB/DMSB Organization



Chart

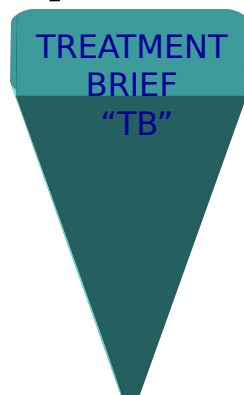




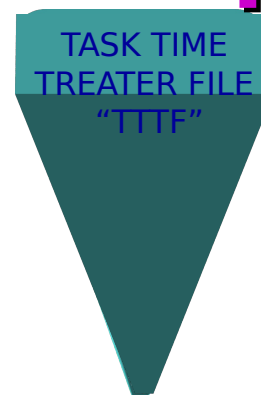
PC/TB/TTT Development



An identified condition that commonly occurs during periods of combat or a in deployed setting



Descriptive brief of patient care to be delivered in the theater at levels 1, 2, 3 (& 4)
CARE IS ESSENTIAL - (& DEFINITIVE CARE IS NOT PRECLUDED)

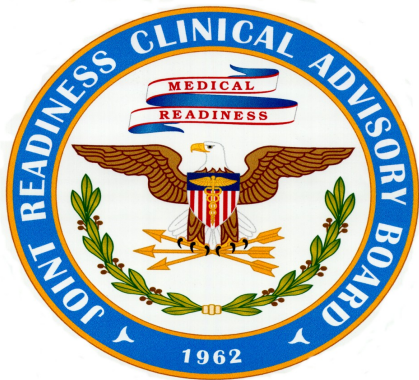


Listing of materiel required to deliver the patient care described in The Treatment Brief - comprised Of NSNs, CSGs, TRAYS, & EQUIP Resulting in a Medical Materiel Set (MMS)/AMAL/ or Assemblage



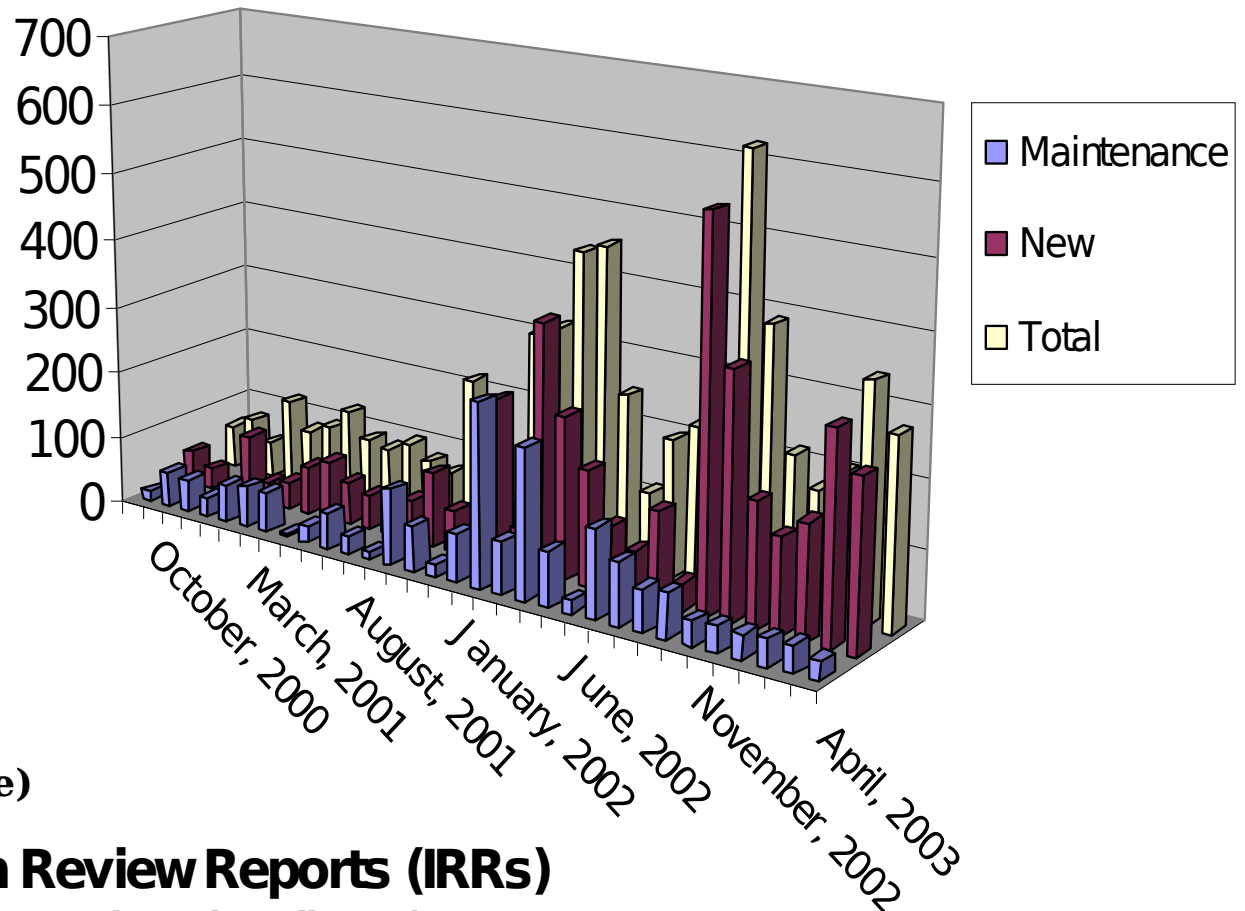
A standard core product to meet the needs of the Quad Services for the initial 60 days of combat that has been agreed upon by all four services using the 7/15 day evac rule





Impact of Global War On Terrorism on JRCAB Workload

**Number of
Actions**



**FY01 Total = 1078
actions**

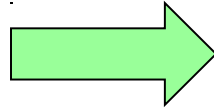
**FY02 Total = 2827
actions**

FY03 Total (to date)

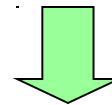
JRCAB Item Review Reports (IRRs)
actions **3228**
(October, 2000 through April, 2003)

Shelf-Life Extension Program

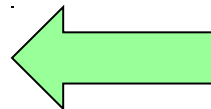
JRCAB serves as
Liaison between
Services & FDA



FDA tests militarily
significant drugs



Extends the shelf-life

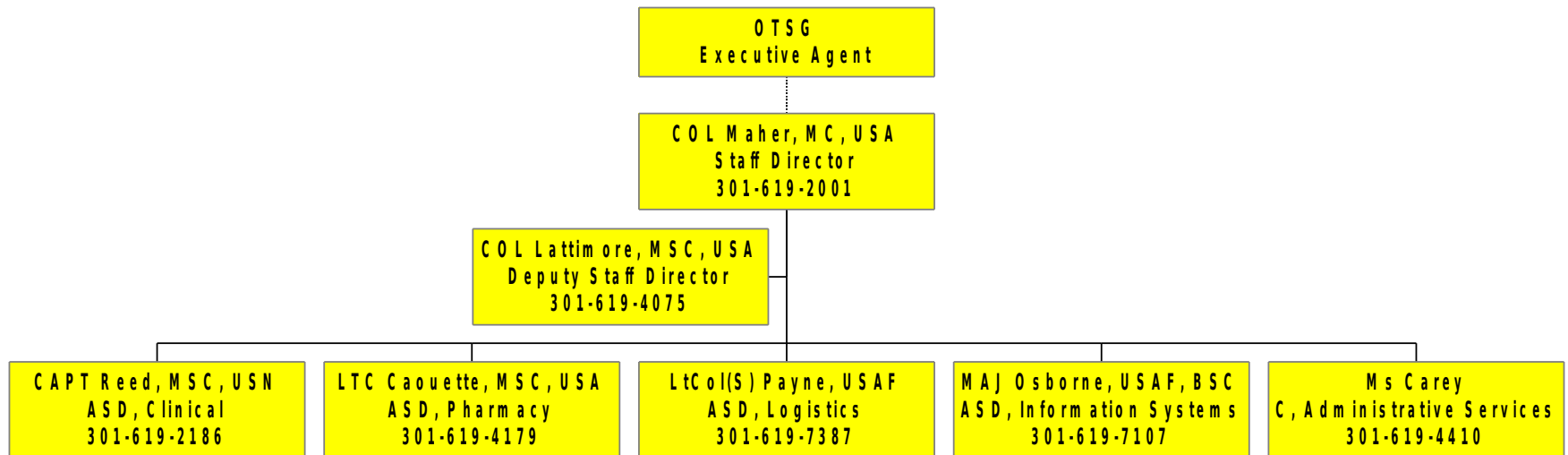


Saves DoD
\$30M for \$0.6M
of testing in FY02

Shelf-life Extension Program (SLEP)

- JRCAB is Joint Coordinator of the Shelf-Life Extension Program, the liaison between Services & FDA, saving government \$40 million in cost avoidance at a testing cost under \$600 thousand.
- Testing selected militarily significant drug products
- Extension of expiration date
- Coordinating with CDC on program for Homeland Defense

JRCAB Staff



JRCAB FY-02 Accomplishments

- **a)** Standardized 3204 new or updated medical items in the DEPMEDS Database – an increase of 160%, meeting the needs of deployed service members during OEF
- **b) New solution to previously unaddressed challenge:** At request of ASD(HA), compiled and updated new consolidated FHP/Med-Log reporting support for DoD-HA for BW-significant antibiotics, vaccines & other critical items
- **c) New solution to previously unaddressed challenge:** Initiated, as member of the DoD Pharmacy and Therapeutics Committee, the first clinician approved joint deployable formulary based primarily upon the JRCAB Task/Time/Treater file and the Basic Core Formulary
- **d) New solution to previously unaddressed challenge:** JRCAB identified a shortcoming in DoD ability to determine requirements for numerous vaccines for FHP. JRCAB initiated the design of a Vaccine Requirements Estimator to assist medical planners and logisticians. DLA is employing the vaccine tool to assess adequacy of national assets and the contract vehicles developed to support deployment surge requirements.
- **e)** Broadened use & expanded support for SLEP to HHS/CDC in support of Homeland Security. At an **annual cost of \$600k** for testing by the FDA, the Services **avoid \$40M in drug replacement costs**. As this is expanded to include the National Pharmaceutical Stockpile, much larger savings are expected.

JRCAB FY-02 Accomplishments

- **f)** Conducted 9 Joint Medical Specialty Panels: Biological Warfare, Maxillo-Facial Surgery, Laboratory/Blood Bank, Microbiology, Nuclear Defense, OR/CMS, Ophthalmology/Optometry, OB-GYN and Urology.
- **g)** Adjudicated 6 Type I(2), II(0), and III(4) medical materiel complaints.
- **h)** Finalized agreement on joint rotary & fixed-wing air-worthiness certification testing standards of PMI, the culmination of a 10-year negotiation.
- **i)** At the suggestion of the TRANSCOM Surgeon, participated in joint panel adding 12 lead EKG capability to USAF Aeromedical Evacuation (AE) PMI – 600 devices purchased (**saving of \$10,000 each**). Clinicians judge 12 lead EKG indispensable for transport of critically ill service members in doctrinal CCATT multi-hour AE.
- **j)** After 4 years of preparatory activity, brought the Common User Database (CUD) to the point (with a feasibility study and POA&M) of issuance of Statement of Work, Request for Proposal and appointment of a permanent Review Panel. Identified **35 programs** within DoD plus additional applications in other federal agencies committed to using the CUD.
- **k)** Trained 19 officers projected to return to their Services as SMEs in joint medical logistics.

'03 &
Beyond

JRCAB Transformation

Common User Database (CUD)

- upgrade to the TTT

Transform the SME panel

- make data available when it is needed

Improve the Cataloging Process

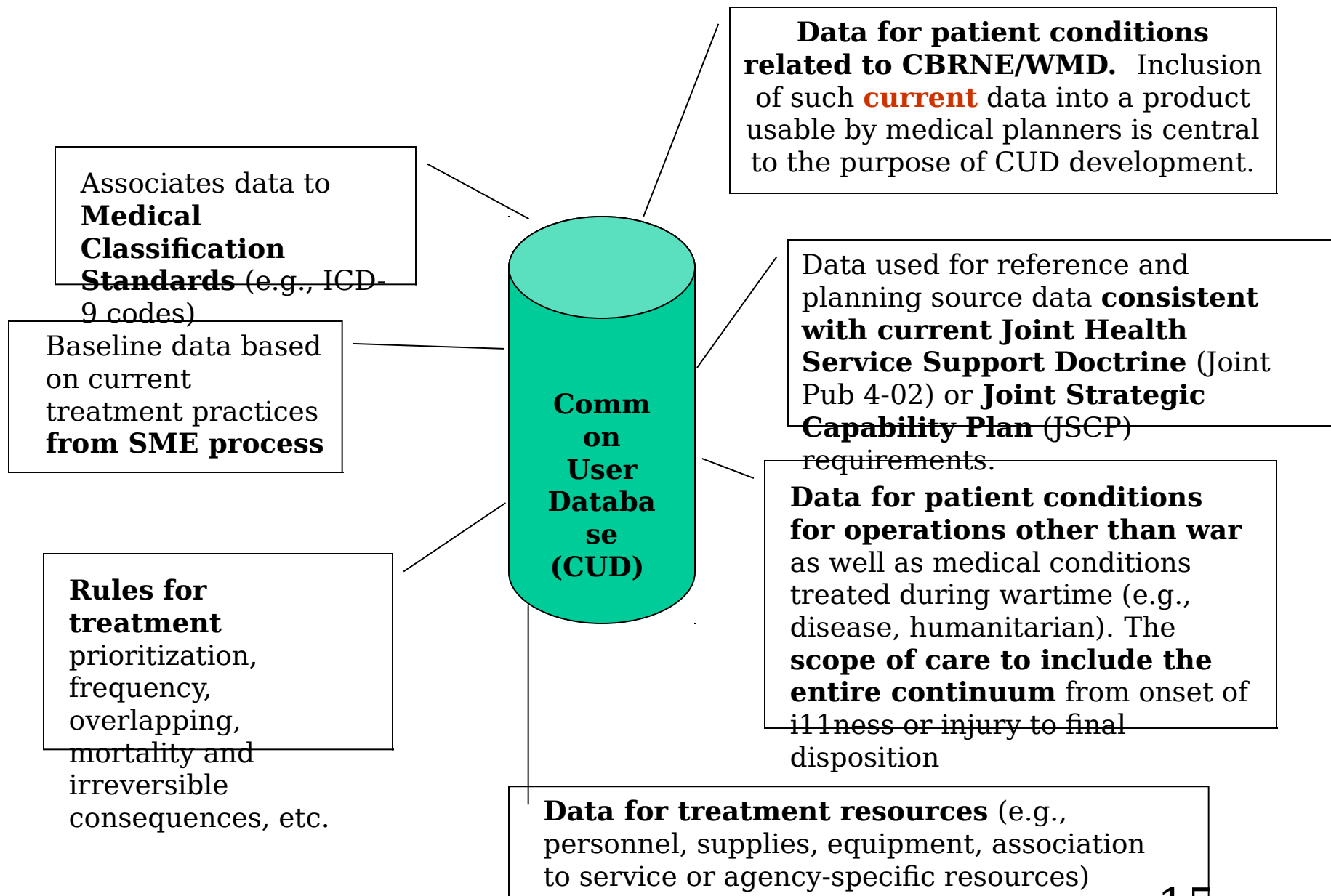
Strengthen & expand relationships with other branches of government (eg., FDA, C

Balanced Scorecard

JRCAB future vision for CUD:

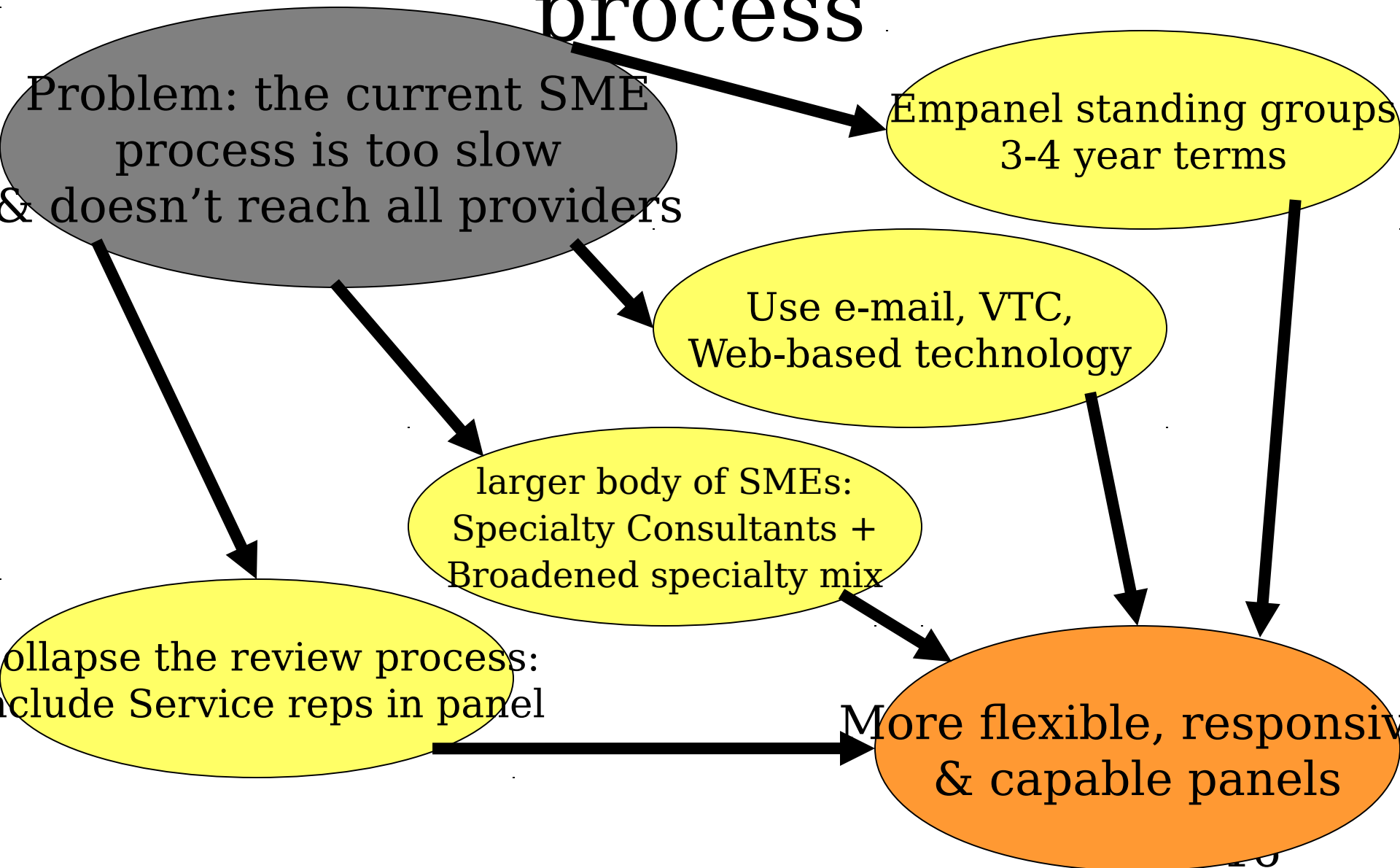
- Serve as a more capable version of the TTT in meeting the requirements of the deployed medical care system, with flexibility currently lacking in the TTT
- Support the Military Health System (MHS) by providing information resources concerning patient care for peacetime, national disasters, humanitarian, and wartime operations
- Provide architecture for medical planners, modelers, logisticians, trainers, and personnel to have flexibility in applying CUD data characteristics into their tools as well as defines standards to optimize reliability of each tool's output
- Expand availability of clinically verified treatment data for additional sectors of medical community, as well as, other governmental agencies to optimize each organization's ability to identify and develop resource needs (e.g., collaborating treatment data for bioterrorism-related issues)

Overview of JRCAB's objectives for the Common User Database (CUD)

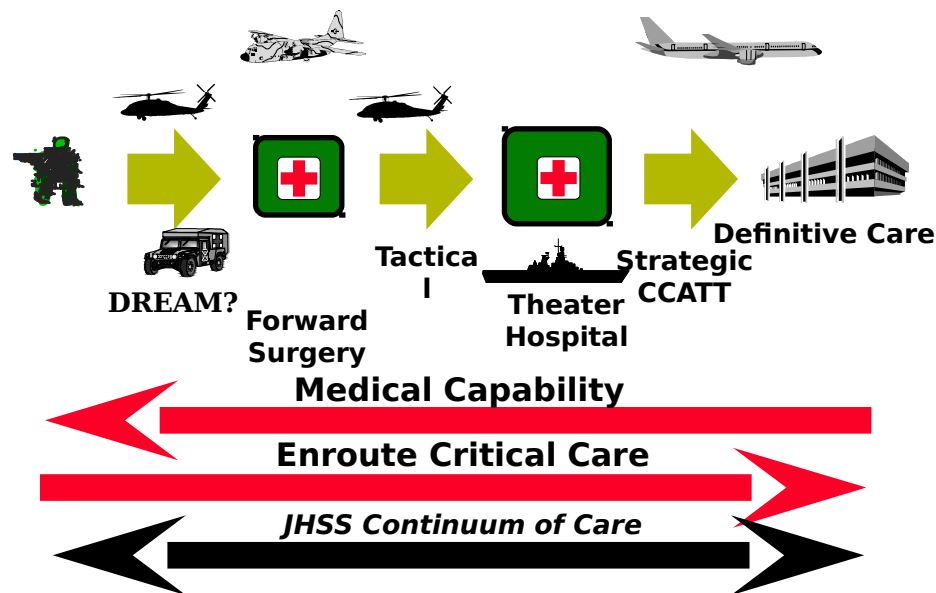


'03 & Beyond

Improving the Panel process



En-route Care



- **Definition**: The ability to maintain the continuum of care from the first responder through all levels of care.
- **Core Competency**: Range of competencies defined by phases of care and mode of transportation, duration of transport, personnel, and level of care initiated.
- **First Responder**: Maintain airway, ventilation, IV, hemorrhage control monitoring, blood pressure, heart rate & respiratory rate monitoring.
- **Forward Surgery**: Post-op ICU care
- **Theater Hospital**: Post-op ICU and medical ICU care
- **Concept of Operations**: The ability to transport *stabilized* patients via any mode of transportation without degradation of care.
- **Technology**: Smaller & lighter.
- **Issues**: Personnel, training, practice standards, pre-evacuation standards, command & control.

Cataloging Improvements

- Participate in 10 Joint IMLG Work Groups targeted at JWCA II initiatives, including:
 - Automation of Maintenance of Cataloging and Sourcing data for existing Medical Materiel within the Defense Logistics systems - goal is web based interactions.
 - Medical Contingency File (MCF): identify & coordinate Joint & Service requirements for war readiness.
 - Joint Task Groups (Product ID) to improve management of Military unique medical items, Catalog Pricing & Defense Inactive Item Project tracking.

'03 & Beyond Mutually Beneficial

Cooperation with Federal Health Agencies

- Homeland Defense medical requirements:
 - HHS, VA and the Services have expressed interest in combined effort to develop operational planning guidance, using JRCAB as the focal point
- CDC is providing resources and staff to share in use of the FDA/Services Shelf-Life Extension Program

JRCAB Strategy Map - Working Draft

21 May 03

